

DOCUMENT CHECKLIST FOR NEW EMPLOYEES

NAME: _____ TITLE: _____

APPOINTMENT DATE: _____ FTE: _____ POS. NO. (Except LEC & CAS): _____

Use check mark (✓) or date to indicate that the forms have been completed and are attached.

DOCUMENT CHECKLIST	EXEC	FAC	APT	GA	LEC	CASUAL
===== TO INITIATE PAYROLL =====						
PNF/Form 6 with valid SSN – (See schedule of payroll deadlines) (Note #1)						
HW-4, Emp's Withholding Allowance & Status Cert – Hawai'i (Attached to PNF) (Note #2)						
W-4, Emp's Withholding Allowance Certificate - U.S. Treasury (Attached to PNF) (Note #2)						
===== WITHIN 3 DAYS OF APPOINTMENT DATE =====						
I-9, Emp Eligibility Verification (With attachments) (Note #3)						
=====AT START DATE (WHEN EMPLOYEE PHYSICALLY REPORTS TO WORK) =====						
Valid Tuberculosis Clearance Certification for Employment (See A9.520) (If applicable)						
FORMS SHALL BE COMPLETED ASAP, BUT NO LATER THAN 30 DAYS OF APPOINTMENT DATE						
EMPLOYEE FORMS (FOR EMPLOYEE TO COMPLETE & SUBMIT TO HR OFFICE VIA PROGRAM)						
Photocopy of official Social Security Card (Note #4)						
D-60, Salary Assign/Cancel - State of Hawai'i, Bank Assignment – (See schedule of payroll deadlines) (Attached to PNF) (Note #5)						
EC&B-1, ERS Membership Enrollment Form (Note #6)				NA		NA
Form 1-A: ERS Designation of Beneficiary (Print on golden rod or yellow) (Note #6)				NA		NA
EC-1, EUTF Enrollment Application; Premium Conv Plan Notice (Note# 7)						NA
Life Insurance: Standard Insurance Company - Beneficiary Designation/Change (Note #7)						NA
D-90, Employees Designation of Beneficiary -State of Hawai'i (For unpaid wages) (Yellow paper only)						
Form SSA-1945, Statement Concerning Your Employment in a Job Not Covered by Social Security (If applicable)	NA					
Personnel Record Card University of Hawaii						
UH Form 92, General Confidentiality Notice (Click here for Instructions)						
UH Form 22, Work Schedule Disclosure Form (Formerly CC/A&S Form 1) (If applicable)						
UH Form 12, Employee's Claim for Prior Creditable Service (If applicable)						
UH Form 88, Disclosure of the Employment of Relatives (Note #8) (If applicable)						
UH Form 27, Ethnic Background Form						NA
Invention Disclosure & Assignment Agreement (See E5.500) (If applicable)						
Application for Faculty/Staff ID Card (If applicable)						NA
Invitation to Identify Disability or Veteran Status				NA	NA	NA
Vacation Addendum for Extramurally Funded Employees (See A8.950)				NA	NA	NA
PTS Deferred Compensation Retirement Plan (Form, Letter and Booklet)	NA	NA	NA			
Graduate Assistant Tuition Exemption	NA	NA	NA		NA	NA
Vacation/Off-Duty Election Form (For faculty who are eligible to earn vacation)	NA		NA	NA	NA	NA
===== EMPLOYER FORMS (FOR PROGRAM TO ATTACH & SUBMIT TO HR OFFICE) =====						
Original Applications for Employment: Executives or Faculty or APT Application Form (UH 64) and resume						
Original Transcripts (If applicable)						
Approved Authorization to Hire, Letters of Offer and Acceptance					NA	
On-line UH EEO/AA Form 17, BOR Recruitment/Selection (See A9.540)					NA	NA
SF-1, Request for Position Action (Approved copy)					NA	NA
Establish Employee ID Number						NA
Approved Exception to DNHR / IT Salary Recommendation	NA	NA		NA	NA	NA
Hawai'i State Employment Service Job Order Form	NA	NA	NA	NA	NA	

DOCUMENT CHECKLIST	EXEC	FAC	APT	GA	LEC	CASUAL
===== NOTICES GIVEN TO EMPLOYEES =====						
Collective Bargaining Agreement (Unit 07/Unit 08)	NA			NA	NA	NA
Official Notice to Faculty, Staff and Students re: Substance Abuse						
Family and Medical Leave Act (FMLA)						
Smoke Free Workplace						
State Ethics Guidelines						
Sexual Harassment and Related Conduct Policy						
Nondiscrimination and Affirmative Action Policy						
Information on Importation/Shipment of Chemicals and Hazardous Materials (If applicable)						
Campus Guide						
Equal Employment Opportunity/Affirmative Action Brochure						
James Gain's Memo (Dec., 2008) Regarding Temporary Employee's on Extramural Funds (If applicable)					NA	NA
Workplace Non-Violence Policy (See E9.210)						
Campus Security Brochure						
Establish ITS email account < http://www.hawaii.edu/help/accounts >						
Federal Tax Limit on Pension Compensation (If applicable)				NA	NA	NA
Hybrid Materials (Note #6)				NA		NA
EUTF Booklet (Note #7)						NA
Premium Conversion Plan flyer (Within 90 days of a qualified change of status) (Note #7)						NA
The Standard: Group Life Insurance Benefits Booklet (Note #7)						NA
The Standard: MedEx Travel Assist Brochure (Note #7)						NA
Employee Benefits Summary Sheet						NA
===== VOLUNTARY PROGRAMS (FOR EMPLOYEE TO COMPLETE & SUBMIT) =====						
Pre-Tax Transportation Benefit Program (O'ahu employees only) (May enroll within 60 days from appointment date) (Note #9)				NA		NA
Campus parking (If applicable)						NA
Island Flex Brochure (contact CFP for enrollment kit: http://www.compfplan.com) (May enroll within 90 days from appointment date) (Note #9)				NA	NA	NA
Savings Bond Form (May enroll at anytime)						
403(b) Tax Sheltered Annuity Program (May enroll at anytime)						
Island Savings Plan (May enroll at anytime) (Note #9)				NA		NA

- NOTES:**
- (1) A completed and fully executed PNF with a valid SSN is the absolute minimum requirement for payroll.
 - (2) If a PNF is submitted to Payroll without tax forms, the marital status will default to "single" and exemptions will default to "0". Upon submitting tax forms, the marital status and exemption will be updated.
 - (3) Employee must complete section 1 of the I-9 before or on the appointment date. The employer must complete section 2 by examining evidence of identity and employment eligibility no later than three (3) business days of the appointment date.
 - (4) A photocopy of Social Security Card or duplicate receipt shall be submitted within 30 days of the appointment date and kept at the department level to be provided to Payroll upon request.
 - (5) State law requires all employees to direct deposit their paycheck. Departments may choose to delay submittal of the D-60 until all required documentation is provided.
 - (6) Employees with appointments of 50% FTE or more and more than 3 months duration are eligible. Completed form shall be submitted to ERS within 30 days of the appointment date.
 - (7) Employees with appointments of 50% FTE or more and at least 3 months duration are eligible. Completed form shall be submitted to EUTF within 30 days of the appointment date.
 - (8) Required only when a supervisory-subordinate relationship exists between relatives in same department. "NA" if not applicable.
 - (9) Eligible to participate in the Employees' Retirement System.

SUBMITTED BY: _____ DEPT: _____ DATE: _____